

LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

**Instructions**

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

FOR OFFICE USE ONLYPostmark Date: 03/07/05SUPP 05/08/04**AMENDMENT****1040247**1. NAME McLeod Shera E
Last First MI2. BUSINESS PHONE 225 334-03223. BUSINESS ADDRESS 524 Kenmore Ave B.R. LA 70808
Street and No. City State ZipMAILING ADDRESS P.O. Box 44312 B.R. LA 70804
Street and No. City State Zip4. EMPLOYER Self5. EMPLOYER'S ADDRESS Same as above
Street and No. City State Zip6. Have you ceased or terminated all lobbying activities requiring registration? Yes _____ No ✓

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name Dell Computer CorporationAddress 1225 Eye Street, NW #920, Washington, DC 20005Business or purpose Computer manufacturer & sales☒ New RepresentationDoes this person pay you? yes

If No, who pays you? _____

☐ Terminated Representation as of _____

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Postmark Date: 03/01/04

SUPP

1040347

1. NAME McDonnell Sherrin E
Last First MI

2. BUSINESS PHONE 225 334-0322

3. BUSINESS ADDRESS 5348 Kenmore Ave B.R. LA 70808
Street and No. City State Zip

MAILING ADDRESS P.O. Box 44312 B.R. LA 70804
Street and No. City State Zip

4. EMPLOYER Self

5. EMPLOYER'S ADDRESS Same as above
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes No ✓

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name Dell Computer Corporation
Address 1225 Eye Street, NW #920, Washington, DC 20005

Business or purpose

☒ New Representation
Does this person pay you? yes

If No, who pays you?

☐ Terminated Representation as of

SUPPLEMENTAL REGISTRATION FORM



2. Name _____

Address _____

Business or purpose _____

☐ New Representation

Does this person pay you? _____

If No, who pays you? _____

☐ Terminated Representation as of _____

3. Name _____

Address _____

Business or purpose _____

☐ New Representation

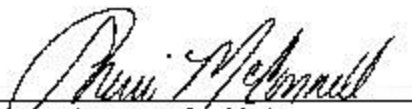
Does this person pay you? _____

If No, who pays you? _____

☐ Terminated Representation as of _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist